SPECIFIC-PURPOSE COMMITTEE

FORM SPAC

| CAMPAIGN FINANCE REPORT COVER SHEET PG | | | | HEET PG 1 | |
|--|---|---|--------------|---|-----------------------|
| The SPAC INSTRUCTION complete this form. | GUIDE explains how to | 1 ACCOUNT # (Ethics Commiss 00000001 | sion filers) | 2 PAGE# | |
| 3 COMMITTEE NAME Frisco Arts Matter | | | | OFFICE US RECEIVED | |
| 4 COMMITTEE ADDRESS Change of Address | ADDRESS / PO BOX; APT / SUITE #; PO Box 1533 Frisco, TX 75034 | CITY; STATI | | MAY 06 City Secretory 11:59 arm Date Hand-delivered or Da | /'s Office |
| 5 CAMPAIGN TREASURER NAME | MS/MRS/MR FIRST Robert NICKNAME LAST | , . , . , | MI SUFFIX | Receipt # Date Processed Date Imaged | Amount |
| 6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business) | King STREET ADDRESS (NO PO BOX PLEASE); 8370 Fair Oaks Dr Frisco, TX 75034-2401 | APT/SUITE #; CITY; | STATE; | ZIP CODE | |
| 7 CAMPAIGN TREASURER'S MAILING ADDRESS Change of Address | 8370 Fair Oaks Dr Frisco, TX 75034-2401 | APT / SUITE #; CITY; | STATE; | ZIP CODE | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER (972) 712-2391 | e EXTE | NSION | | |
| 9 REPORT TYPE | January 15 July 15 | 30th day before electi X 8th day before electi Runoff | | Exceeded \$500 Dissolution (atta | ch PAC-DR) ampalgn |
| 10 PERIOD COVERED | Month Day Yea | THROUGH | Н | Month Day 05/06/201 | Year 1 |
| 11 ELECTION | ELECTION DATE Month Day Year 05/14/2011 [| ELECTION TYPE Primary Rur | neff X | General S | pecial |
| GO TO PAGE 2 | | | | | |

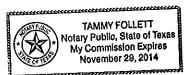
Austin, Texas 78711-2070

SPECIFIC-PURPOSE COMMITTEE REPORT: **PURPOSE & TOTALS**

FORM SPAC COVER SHEET PG 2

1-800-325-8506

| 12 COMMITTEE Fris | sco Arts Matter | | ACCOUNT # (I | Ethics Commission filers) |
|---|---|---|--|---------------------------|
| 13 COMMITTEE PURPOSE | CANDIDATE / OFFICEHOLDER NAME | | | |
| (Attach lists on plain paper to complete this report if necessary.) | OFFICEHOLDER | OFFICE SOUGHT (candidate) / OFFICE HELD (officeho | older) | |
| SUPPORT (Candidate or Measure) | | | TION DATE Day Year | |
| OPPOSE (Candidate or Measure) | | Proposition #1 05 | -14-2011 | |
| ASSIST (Officeholder only) | MEASURE | Proposition #1 05 DESCRIPTION PROPOSITION to Revoke the 15sue the Bonds ofor the | city nutho | arily to |
| | 15sue the Bonds of on the ACC | | | |
| | | | | |
| 14 CONTRIBUTION TOTALS | | OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ | 200.00 |
| | | POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 8,280.00 |
| EXPENDITURE TOTALS | 3. TOTAL P | OLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED | \$ | 0.00 |
| | 4. TOTAL P | OLITICAL EXPENDITURES | \$ | 5,385.07 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | | \$ | 0.00 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00 | | | 0.00 |
| 15 AFFIDAVIT | | | a militari e e e e e e e e e e e e e e e e e e e | |



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _

Signature of officer administering oath

, to certify which, witness my hand and seal of office.

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

| | OTTEN THAN I LEDGEO ON LOANS | | | | |
|---|------------------------------|--|---------------------|-------------------------------|---|
| | The Instruction | אס Guide explains how to complete this form. | | 1 PAGE# Schedule: 1/ | 7 Report: 3/13 |
| 2 | FILER NAME | Frisco Arts Matter | | 3 ACCOUNT# 00000001 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor ☐ out-of-state PAC (ID: Allen, Robert | /) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| | 04/15/2011 | 6 Contributor address; City; State; Zip Code 10601 Big Horn Trail Frisco, TX 75035 | | \$150.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| 9 | Principal occup | ation / Job title (See Instructions) | 10 Employer (See In | structions) | |
| | Date | Full name of contributor | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 04/15/2011 | Contributor address; City; State; Zip Code 2705 Ridge View Rd Frisco, TX 75034 | | \$100.00 | |
| | | | : | | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In | structions) | |
| | Date | Full name of contributor ☐ out-of-state PAC (ID# Baggett, Melanie | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 04/21/2011 | Contributor address; City; State; Zip Code 5708 Danmire Ct Plano, TX 75093 | | \$100.00 | |
| | | | | (if travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In: | structions) | |
| | Date | Full name of contributor ut-of-state PAC (ID# Bowers, Vanesa | £) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 05/01/2011 | Contributor address; City; State; Zip Code 5667 Gadwall Dr Frisco, TX 75034 | , , , | \$150.00 | - |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See Ins | structions) | |
| | Date | Full name of contributor | ·) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 04/21/2011 | Contributor address; City; State; Zip Code 6390 Chamberlyne Dr Frisco, TX 75034 | | \$500.00 | |
| | | | | (if travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See Ins | | |
| | | | | | |

TDD 1-800-735-2989

SCHEDULE A

| POLITICAL C | ONTRIBUTI | ONS |
|--------------------|-----------|----------|
| OTHER THAN | I PLEDGES | OR LOANS |

Texas Ethics Commission

| Date S Full name of contributor Duron, Jane Out-of-state PAC (ID# | | OTHER THAN PLEDGES OR LOANS | | | | |
|--|---|-----------------------------|--|---|-----------------------|---|
| Date Full name of contributor out-of-state PAC (ID#) 7. Amount of contribution (if applicable of Texas, complete Schedule 7) Principal occupation / Job title (See Instructions) In-kind contribution (if applicable of Texas, complete Schedule 7) Principal occupation / Job title (See Instructions) Im-kind contribution In-kind contribution In-kin | | The Instruction | אס Guide explains how to complete this form. | | 1 | 7 Report: 4/13 |
| Damon, Jane O4/15/2011 6 Contributor address; City; State; Zip Code \$100.00 Gravel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Date Full name of contributor Dowdy, Jenny O4/15/2011 Contributor address; City; State; Zip Code \$100.00 Principal occupation / Job title (See Instructions) Date Full name of contributor Dowdy, Jenny O4/15/2011 Contributor address; City: State; Zip Code \$100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Date Full name of contributor Duan, Lisa O4/21/2011 Contributor address; City; State; Zip Code \$60.00 Fraco, TX 75035 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Date Full name of contributor Duan, Lisa O4/21/2011 Contributor address; City; State; Zip Code \$60.00 Fraco, TX 75035 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Fancin Charitable Foundation O4/21/2011 Contributor address; City; State; Zip Code \$50.00 Fancin Charitable Foundation O4/16/2011 Contributor address; City; State; Zip Code \$50.00 Fannin Charitable Foundation O4/16/2011 Contributor address; City; State; Zip Code \$2,500.00 Fannin Charitable Foundation O4/16/2011 Contributor address; City; State; Zip Code \$2,500.00 O4/16/2011 Contributor address; City; State; Zip Code | 2 | FILER NAME | Frisco Arts Matter | | I | (Ethics Commission filers) |
| Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) | 4 | Date | | #) | | 8 In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) Date Full name of contributor | | 04/15/2011 | 2442 Foxcreek Dr | | \$100.00 | |
| Date Full name of contributor out-of-state PAC (ID# | | | | | (If travel outside of | Texas, complete Schedule T) |
| Dowdy, Jenny Contributor address; 9523 Knight Lane Frisco, TX 75035 City; State; Zip Code \$100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date | 9 | Principal occup | ation / Job title (See Instructions) | 10 Employer (See In | structions) | |
| S23 Knight Lane Frisco, TX 75036 (If travel outside of Texas, complete Schedule T) | | Date | | <u> </u> | | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) Date | , | 04/15/2011 | 9523 Knight Lane | • | \$100.00 | |
| Date Pull name of contributor | | | | | (if travel outside of | Texas, complete Schedule T) |
| Duan, Lisa Duan, Lisa | | Principal occup | ation / Job title (See Instructions) | Employer (See In | structions) | |
| 11200 Seguin Dr Frisco, TX 75035 (If travel outside of Texas, complete Schedule T) | | Date | | <i>‡</i>) | | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Date Full name of contributor | (| 04/21/2011 | 11200 Seguin Dr | | \$50.00 | [|
| Date Full name of contributor description (if applicable Contribution (s) Amount of contribution (s) General Contribution (s) | | | | | l ' | Texas, complete Schedule T) |
| Edwards, Jerry Contribution (\$) description (if applicable of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#) Amount of contribution (first applicable of Texas, complete Schedule T) O4/16/2011 Contributor address; City; State; Zip Code \$2,500.00 Toolst Hwy 121 Frisco, TX 75035 (If travel outside of Texas, complete Schedule T) Fundamental of the principal occupation (If applicable of Texas, complete Schedule T) Contributor address; City; State; Zip Code \$2,500.00 Contributor address; City; State; Zip Cod | | Principal occup | ation / Job title (See Instructions) | Employer (See In | structions) | |
| 14598 Holly Leaf Frisco, TX 75034 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID# | | Date | , | <u> </u> | | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor | (| 04/21/2011 | 14598 Holly Leaf | | \$50.00 | |
| Date Full name of contributor out-of-state PAC (ID#) Amount of contribution (\$) In-kind contribution (if applicable contribution (\$) Contributor address; City; State; Zip Code 1500St Hwy 121 Frisco, TX 75035 (If travel outside of Texas, complete Schedule T) | | | | | (If travel outside of | Texas, complete Schedule T) |
| Fannin Charitable Foundation O4/16/2011 Contributor address; City; State; Zip Code \$2,500.00 1500St Hwy 121 Frisco, TX 75035 (If travel outside of Texas, complete Schedule T) | | Principal occup | ation / Job title (See Instructions) | Employer (See In | structions) | |
| 1500St Hwy 121 Frisco, TX 75035 [(If travel outside of Texas, complete Schedule T) | | Date | | <u> </u> | | In-kind contribution description (if applicable) |
| | (| 04/16/2011 | 1500St Hwy 121 | | \$2,500.00 | - |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | | | | | (If travel outside of | Texas, complete Schedule T) |
| | | Principal occup | ation / Job title (See Instructions) | Employer (See Ins | structions) | |

Austin, Texas 78711-2070

5 Full name of contributor ut-of-state PAC (ID#_

6 Contributor address; City; State; Zip Code

Full name of contributor ut-of-state PAC (ID#

Contributor address; City; State; Zip Code

Full name of contributor ut-of-state PAC (ID#_

Contributor address; City; State; Zip Code

Full name of contributor ut-of-state PAC (ID#_

Contributor address; City; State; Zip Code

Full name of contributor ut-of-state PAC (ID#

Contributor address; City; State; Zip Code

Austin, Texas 78711-2070

10 Employer (See Instruc

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

The Instruction Guide explains how to complete this form.

Friedel, Lianne

Principal occupation / Job title (See Instructions)

Gibson, Deborah

10826 Wilton Dr Frisco, TX 75035

Principal occupation / Job title (See Instructions)

Henry, Mark

8660 Crestview Dr Frisco, TX 75034

Principal occupation / Job title (See Instructions)

Hoxie, Julia

1876 Darnell Circle Frisco, TX 75034

Principal occupation / Job title (See Instructions)

Jensen, Imogene

12874 Belle Isle Ln Frisco, TX 75034

Principal occupation / Job title (See Instructions)

5729 Lebanon Rd Ste 144 Frisco, TX 75034

2 FILER NAME Frisco Arts Matter

4

Date

04/15/2011

Date

04/15/2011

Date

04/21/2011

Date

04/15/2011

Date

04/16/2011

| xas 78711-2070 | (512)46 | 3-5800 | TDD 1-80 | 0-735-298 |
|-------------------|-------------------------------|-------------|--|---|
| | | sc | HEDULE | A |
| . | | | | |
| | 1 PAGE# Schedule: 3/1 | 7 Report | 5/13 | |
| | 3 ACCOUNT# | | ommission file | rs) |
| | 00000001 | · | | |
|) | 7 Amount of contribution (\$) | | ind contribution otion (if application) | |
| | \$50.00 | | | d management |
| | (If travel outside of | Texas, com | olete Schedule | т) 🔲 |
| Employer (See In | structions) | | | |
| | Amount of | | ind contributio | |
| | contribution (\$) | descrip | otion (if applica | 30(6) |
| | \$100.00 | | | |
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| Employee (Occ. In | (if travel outside of | Texas, comp | olete Schedule | т) 🔲 |
| Employer (See In | structions) | | | |
| <u> </u> | Amount of | l In-k | Ind contributio | n |
| | contribution (\$) | descrip | otion (if applica | able) |
| | \$50.00 | | | |
| | \$30.00 | | | |
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| Employer (See In: | (if travel outside of | Texas, comp | lete Schedule | T) |
| Employor (ood iii | ou double) | | | |
|) | Amount of | ln-ki | nd contributio | n |
| | contribution (\$) | | tion (if applica | |
| | \$100.00 | | | |
| | | | | _ |
| Employer (See Ins | (If travel outside of | Texas, comp | lete Schedule | <u>r) </u> |
| Embloket (See Itt | suucuons <i>j</i> | | | |
|) | Amount of contribution (\$) | | nd contributio tion (if applica | |
| | \$50.00 | | | |
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| | (if travel outside of * | Texas, comp | lete Schedule | п□□ |

POLITICAL CONTRIBUTIONS

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

| | OTHER THAN PLEDGES OR LOANS | | | | |
|--|---|---|---------------------|-------------------------------|---|
| | The Instruction Guide explains how to complete this form. | | | 1 PAGE # Schedule: 4/ | 7 Report: 6/13 |
| 2 | FILER NAME | Frisco Arts Matter | | 3 ACCOUNT# 00000001 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor ☐ out-of-state PAC (ID# Joyner, Sheila |) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| | 04/15/2011 | 6 Contributor address; City; State; Zip Code 9950 Little Horn Circle Frisco, TX 75035 | | \$50.00 | 1 |
| | | | | (if travel outside of | Texas, complete Schedule T) |
| 9 | Principal occup | ation / Job title (See Instructions) | 10 Employer (See In | structions) | |
| | Date | Full name of contributor ☐ out-of-state PAC (ID# Kadlec, Harvey | <i>‡</i>) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| I | 04/21/2011 | Contributor address; City; State; Zip Code 903 Pasatiempo Dr Frisco, TX 75034 | | \$50.00 | |
| | | | | (if travel outside of | Texas, complete Schedule T) |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | | | | | |
| | Date | Full name of contributor | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| ı | 04/28/2011 | Contributor address; City; State; Zip Code 4503 Munira Dr Frisco, TX 75034 | | \$50.00 | l f l |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In: | structions) | |
| | Date | Full name of contributor ut-of-state PAC (ID# King, Robert (Mr.) | F) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| (| 04/28/2011 | Contributor address; City; State; Zip Code 8370 Fair Oaks Dr Frisco, TX 75034-2401 | | \$350.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See Ins | structions) | |
| | Date | Full name of contributor ut-of-state PAC (ID# Litwin, Martin |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| (| 04/16/2011 | Contributor address; City; State; Zip Code 6101 Ohio Dr D-10 Plano, TX 75024 | | \$100.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See Ins | structions) | |

POLITICAL CONTRIBUTIONS

| | CAL CONTRIBUTIONS THAN PLEDGES OR LOAI | NS | | SCHEDULE A |
|-------------------|---|---------------------|-------------------------------|--|
| The Instruction | วง Guide explains how to complete this form. | | 1 PAGE# | 7 Report: 7/13 |
| 2 FILER NAME | Frisco Arts Matter | | 3 ACCOUNT# 00000001 | (Ethics Commission filers) |
| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID# Maus, Stephen | <u> </u> | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| 04/25/2011 | 6 Contributor address; City; State; Zip Code 2500 Legacy Dr Ste 250 Frisco, TX 75034 | | \$500.00 | |
| | | | L ' | Texas, complete Schedule T) |
| 9 Principal occup | pation / Job title (See Instructions) | 10 Employer (See In | structions) | |
| Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 04/16/2011 | Contributor address; City; State; Zip Code 5512 W Plano Pky Suite 200 Plano, TX 75093 | | \$2,000.00 | |
| | | | <u>'</u> | Texas, complete Schedule T) |
| Principal occup | eation / Job title (See Instructions) | Employer (See In: | structions) | |
| Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 04/25/2011 | Contributor address; City; State; Zip Code 3909 Wood Lake Dr Plano, TX 75093 | | \$250.00 | |
| | | | <u></u> | Texas, complete Schedule T) |
| Principal occur | eation / Job title (See Instructions) | Employer (See In: | structions) | |
| Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 04/15/2011 | Contributor address; City; State; Zip Code PO Box 906 Frisco, TX 75034 | | \$100.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |
| Principal occup | ation / Job title (See Instructions) | Employer (See Ins | structions) | |
| Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 04/21/2011 | Contributor address; City; State; Zip Code 5613 Norfolk Ln Frisco, TX 75035 | | \$150.00 | |
| | 111000 | | (If travel outside of | Texas, complete Schedule T) |
| Principal occup | ation / Job title (See Instructions) | Employer (See Ins | ' | , |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

| | The Instruction | אס Guide explains how to complete this form. | | 1 PAGE # Schedule: 6/ | 7 Report: 8/13 |
|---|------------------|--|---------------------|-------------------------------|--|
| 2 | FILER NAME | Frisco Arts Matter | | 3 ACCOUNT# 00000001 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor ☐ out-of-state PAC (ID: Shipman, Theresa | <u> </u> | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| | 05/01/2011 | 6 Contributor address; City; State; Zip Code 10141 Calvery Court Frisco, TX 75035 | | \$20.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| 9 | Principal occup | ation / Job title (See Instructions) | 10 Employer (See In | structions) | |
| | Date | Full name of contributor | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 04/25/2011 | Contributor address; City; State; Zip Code 10420 Big Horn Trl Frisco, TX 75035 | | \$50.00 | |
| | | 111860, 17 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In | structions) | |
| | | | | | |
| | Date | Full name of contributor | !) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 04/15/2011 | Contributor address; City; State; Zip Code 7121 Yellowstone Dr Frisco, TX 75034 | | \$50.00 | |
| | | | | (if travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In | structions) | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 04/30/2011 | Contributor address; City; State; Zip Code 1900 Preston Rd Suite 267 Plano, TX 75093 | | \$50.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In | structions) | |
| | Date | Full name of contributor | ·) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 04/15/2011 | Contributor address; City; State; Zip Code 5112 Lakeland Dr Frisco, TX 75035 | | \$100.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occupa | ation / Job title (See Instructions) | Employer (See In: | structions) | |
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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|---|-----------------|--|----------------------|-------------------------------|--|
| | The Instruction | אס Guide explains how to complete this form. | | 1 PAGE# Schedule: 7/ | 7 Report: 9/13 |
| 2 | FILER NAME | Frisco Arts Matter | | 3 ACCOUNT# 00000001 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor ☐ out-of-state PAC (ID# Valdez, Glendora | | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| | 05/01/2011 | 6 Contributor address; City; State; Zip Code 5112 Lakeland Dr Frisco, TX 75035 | | \$30.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| 9 | Principal occup | ation / Job title (See Instructions) | 10 Employer (See In: | structions) | |
| | Date | Full name of contributor ☐ out-of-state PAC (ID# Weinberg, Sharon |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 04/15/2011 | Contributor address; City; State; Zip Code 8319 Fair Oaks Dr Frisco, TX 75034 | | \$30.00 | |
| | | | : | | l Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See Ins | structions) | |
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SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense

to benefit C/OH

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

EXPENDITURE CATEGORIES Safaries/Wages/Contract Labor Solicitation/FundralsIng Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

Polling Expense Printing Expense Event Expense Office Overhead/Rental Expense The Instruction Guipe explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Frisco Arts Matter 00000001 Schedule: 1/4 Report: 10/13 4 Date 5 Payee name 04/16/2011 Carter, Leigh Ann Amount (\$) Payee address State: Zip Code 7110 Main St \$374.86 Frisco, TX 75034 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Reimburse for printing of informational card inserts Advertising Expense OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Embroid Me 04/28/2011 Payee address City; State; Zip Code Amount (\$) \$349,11 3411 Preston Rd Suite 6 Frisco, TX 75034 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** T-Shirts Advertising Expense OF EXPENDITURE Office sought: Office held: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH Date Payee name Farstar 04/19/2011 Payee address City; State; Zip Code Amount (\$) 7110 Main St \$445.45 Frisco, TX 75034 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Mailer Advertising Expense OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name First Graphic Services Inc. 04/21/2011 Payee address City; Amount (\$) State; Zip Code 229 Garvon St \$1,078.17 Garland, TX 75040 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Printing Campaign Signs Printing Expense **EXPENDITURE** Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

| The Instruction Guide explains how to complete this form. | | | |
|---|---|--|--|
| 1 PAGE# | 2 FILER NAME | 3 ACCOUNT # (TEC filers) | |
| Schedule: 2/4 Re | eport: 11/13 Frisco Arts Matter | 0000001 | |
| 4 Date | 5 Payee name | | |
| 04/21/2011 | Lazar, Randi | ······································ | |
| 6 Amount (\$) | 7 Payee address City; State; Zip Code | | |
| \$125.73 | 8319 Prescott Cr Frisco, TX 75035 | | |
| | 111000, 17(10000 | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description (If travel outside of Texas, complete Schedule T) | |
| PURPOSE | Event Expense | K/O Event | |
| OF EXPENDITURE | | | |
| | | | |
| 9 Complete ONLY if direct expenditure | Candidate / Officeholder name | Office sought: Office held: | |
| to benefit C/OH | | | |
| Date | Payee name | | |
| 04/21/2011 | Nunn, James | | |
| Amount (\$) | Payee address City; State; Zip Code | | |
| \$202.86 | 10341 Casetta Dr Frisco, TX 75035 | | |
| | 111800, 17 73033 | | |
| | Category (See Categories listed at the top of this schedule) | Description (If travel outside of Texas, complete Schedule T) | |
| PURPOSE | Printing Expense | Handout Printing Costs | |
| OF EXPENDITURE | | , and the second | |
| -// -//-// | | | |
| Complete ONLY if direct expenditure | Candidate / Officeholder name | Office sought: Office held: | |
| to benefit C/OH | | | |
| Date | Payee name | | |
| 04/21/2011 | Nunn, James | | |
| Amount (\$) | Payee address City; State; Zip Code | | |
| \$116.91 | 10341 Casetta Dr | | |
| | Frisco, TX 75035 | | |
| | Category (See Categories listed at the top of this schedule) | Description (If travel outside of Texas, complete Schedule T) | |
| PURPOSE | Event Expense | Beverages | |
| OF EXPENDITURE | • | | |
| | | | |
| Complete ONLY if | Candidate / Officeholder name | Office sought: Office held: | |
| direct expenditure to benefit C/OH | | | |
| Date | Payee name | | |
| 04/15/2011 | PayPal | | |
| Amount (\$) | Payee address City; State; Zip Code | | |
| \$1.75 | 2211 N first St | | |
| | San Jose, CA 95131 | | |
| | Cotogoni (Ose Cotogodes Balada III.) | Deposition (If translantists of Targets and Targets an | |
| PURPOSE | Category (See Categories listed at the top of this schedule) Fees | Description (If travel outside of Texas, complete Schedule T) Processing fee | |
| OF EXPENDITURE | 1 000 | 1 Toolooning Too | |
| EXPENDITURE | | | |
| Complete ONLY if | Candidate / Officeholder name | Office sought: Office held; | |
| direct expenditure to benefit C/OH | | | |

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Texas Ethics Commission

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel in District Travel Out Of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

| Fees | Printing Expense Office Overhead/Re The Instruction Guide explains how | |
|--|--|---|
| 1 PAGE# | 2 FILER NAME | 3 ACCOUNT# (TEC filers) |
| Schedule: 3/4 Re | IT = 1 - 1 - 1 - 1 - 1 | 00000001 |
| 4 Date | 5 Payee name | |
| 04/15/2011 | PayPal | |
| 6 Amount (\$) | 7 Payee address City; State; Zip Code | |
| \$1.75 | 2211 N first St | |
| · | San Jose, CA 95131 | |
| | | |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) Description (If travel outside of Texas, complete Schedule T) |
| OF | Fees | Processing fee |
| EXPENDITURE | | |
| 9 Complete ONLY if | Candidate / Officeholder name | Office sought: Office held: |
| direct expenditure to benefit C/OH | | |
| Date | Payes nome | |
| 04/21/2011 | Payee name PayPal | |
| Amount (\$) | Payee address City; State; Zip Code | |
| \$1.75 | 2211 N first St | |
| Ψ1.70 | San Jose, CA 95131 | |
| | | |
| PURPOSE | Category (See Categories listed at the top of this schedule) | Description (If travel outside of Texas, complete Schedule T) |
| OF | Fees | Processing fee |
| EXPENDITURE | | <u> </u> |
| Complete ONLY if | Candidate / Officeholder name | Office sought: Office held: |
| direct expenditure to benefit C/OH | | |
| | | |
| Date | Payee name PayPal | |
| 04/21/2011 Amount (\$) | Payee address City; State; Zip Code | |
| | 2211 N first St | |
| \$1.75 | San Jose, CA 95131 | |
| | | |
| | Category (See Categories listed at the top of this schedule) | Description (If travel outside of Texas, complete Schedule T) |
| PURPOSE OF | Fees | Processing fee |
| EXPENDITURE | | |
| Complete ONLY if | Candidate / Officeholder name | Office sought: Office held: |
| direct expenditure | Candidate / Officender frame | Office sought. Office field. |
| to benefit C/OH | | |
| Date | Payee name | |
| 04/30/2011 | PayPal | |
| Amount (\$) | Payee address City; State; Zip Code | |
| \$1.75 | 2211 N first St San Jose, CA 95131 | |
| ļ | | |
| | Category (See Categories listed at the top of this schedule) | Description (If travel outside of Texas, complete Schedule T) |
| PURPOSE | Fees | Processing fee |
| OF EXPENDITURE | | |
| | | |
| Complete ONLY if direct expenditure | Candidate / Officeholder name | Office sought: Office held: |
| to benefit C/OH | | |

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundralsing Expense Travel In District Travel Out Of District Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

| Event Expense Fees | | | |
|---|--|---|-----------------------------------|
| | - | to complete this form. | To ACCOUNT # (TECSION) |
| 1 PAGE# Schedule: 4/4 Re | 2 FILER NAME Frisco Arts Matter | | 3 ACCOUNT # (TEC filers) 00000001 |
| 4 Date | 5 Payee name | | |
| 04/16/2011 | Tractor Supply | | |
| 6 Amount (\$) | 7 Payee address City; State; Zip Code | | |
| \$110.27 | 3350 N. Central Expressway McKinney, TX 75071 | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description (If travel outsing T-Posts & hardware for | de of Texas, complete Schedule T) |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
| Date 04/15/2011 | Payee name Unites States Post Office | | |
| Amount (\$) | Payee address City; State; Zip Code | | |
| \$1,364.00 | 3905 Hedgcoxe Rd Plano, TX 75025 | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description (If travel outsice Postage Stamps for mail | le of Texas, complete Schedule T) |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
| Date 04/29/2011 | Payee name Unites States Post Office | | |
| Amount (\$) | Payee address City; State; Zip Code | | |
| \$1,208.96 | 3905 Hedgcoxe Rd Plano, TX 75025 | | |
| PURPOSE OF | Category (See Categories listed at the top of this schedule) Advertising Expense | Description (If travel outside Postage for mailer | e of Texas, complete Schedule T) |
| EXPENDITURE | | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
| | | | |